U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

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## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Nu	imber U-2/	075	2. Fiscal Year Covered From:
			1/1/304 Through: 12/3/19004
3. Name	and address of pe	erson filing.	4. Name, file number, and εddress of labor organization.
Name	MARK	Harrow	Name LABORET! INT, GNION OF N. AMERIC
			Labor Organization File Number 006- 13/
P.O. Bo.	x, Bldg., Room No	o., if any	P.O. Box, Building and Room Number, if any
Street	1107	E. 504+ # 51.	Street 905 16 1H ST, NARTH WOST
City	CL 12	100	City WASHINGTON
State	TUV	ZIP Code +4 6 1727	State D. STRIC OF COLUMNIZIP Code + 4 JOSO 6
5. Positio	on in labor organiza	ation.	
monetar 6. Name	ry value from an	gaged in transactions (including loans) with, or	or derived income or other economic benefit of ation represents or is activally seeking to represent.  7.a. Nature of Interest, Transaction, or Income.
Name			
Trade N	Name, if any:		
P.O. <b>B</b> o	ox, Bldg., Room No	o., if any	7.b. Amount.
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·		Sig	ignature
15. Si	gnature and verif	ication. The undersigned declares, under penalty of	of Perjury and other applicable penalties of the law, that all of the information
submi	tted in this report (i sianed's knowleda	including the information contained in any accompar e and belief, true, correct and complete. (See the s	anying documents), has been examined by the signatory and is, to the best of the section on penalties in the instructions.)

Name of Person Filing & MARK HANNON	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name if any).  Name LAKIN LAWFIN W  Trade Name, if any:  P.O. Box, Bldg., Room No., if any PUBIX 9-7  Street \$51 GUD \$1, NOGIS RD.  City WOOD RIVER  State LU ZIP Code +4 62095	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing.  PROVIDE LEGAU SERVICE FOR  LARDRERS	
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C. Received from any employer (other than an amployer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
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13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

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Name of Person Filing 5 MARK HANNA	File Number U-	
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Trade Name, if any:	b. Trust	
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Name of Person Filing 5 MARK HANNOR	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
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13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

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13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing 5 MARK HAWNON	File Number U-	
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
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P.O. Box, Bldg., Room No., if any PO Gent 12-67	c. Employer	
Street		
city JACKSON VILLE		
State JUU ZIP Code + 4 6365/		
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U.S. Department of Labor Employee Standards Administration Office of Labor-Management Standards 200 Constitution Avenue, NW Room N-5616 Washington, D.C. 20210

RE: FORM LM. 30 FILINGS. FU, ARK HANDON

Dear Sir or Madam:

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,

2 Months